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APPLICANTS Gust H. Bardy, Seattle, WA;				
** CONTINUING DATA ***** This application is a CON of 10/251,473 09/20/2002 which is a CON of 09/860,979 05/18/2001 PAT 6,478,737 which is a CON of 09/686,712 10/10/2000 PAT 6,331,160 which is a CON of 09/361,777 07/26/1999 PAT 6,203,495 which is a CIP of 09/324,894 06/03/1999 PAT 6,312,378				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/20/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY WA	SHEETS DRAWING 21	TOTAL CLAIMS 15 INDEPENDENT CLAIMS 6
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TITLE SYSTEM AND METHOD FOR PROVIDING FEEDBACK TO AN INDIVIDUAL PATIENT FOR AUTOMATED REMOTE PATIENT CARE				
FILING FEE RECEIVED 1302	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	